ORABIE B - FEE(S) TRANSMITTAL

DEC 1 5 7005

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

INSTRUCTIONS: This for appropriate. All further conindicated unless corrected in the control of	respondence including the P	Street Street	conscipuing a nev	ion of maintenance tees	will be mailed to the current	correspondence address as rate "FEE ADDRESS" for
maintenance fee notification	is.	in Dioceanie by (a)	specifying a nev	v correspondence address	s, and/or (b) indicating a sept	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				napers. Each addition	f mailing can only be used for his certificate cannot be used to hal paper, such as an assignment	or domestic mailings of the for any other accompanying ent or formal drawing, must
002292 75		have its own certifica	te of mailing or transmission.	•		
BIRCH STEWA PO BOX 747 FALLS CHURCH, 16/2005 MBEYENE2 0000	RT KOLASCH & BI VA 22040-0747 0197 10613004	RCH,LLP		I hereby certify that states Postal Service addressed to the Matransmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir ail Stop ISSUE FEE address PTO (571) 273-2885, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
						(Depositor's name)
FC:1501 1400.00 OP		•		(Signature)		
FC:1504	300.00 00	300.00 OP				(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INV		/ENTGR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/613,004	07/07/2003	Pi-Hai Liu			3313-1010P	4492
· ·	NCODING AND DECODIN	G METHOD OF A	RECORD MED	niim		
			-			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700 —	12/20/2005
EXAM	EXAMINER		T	CLASS-SUBCLASS		
JEANGLAUDE, JEAN BRUNER		2819		341-068000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1BIRCH, STEWART, KOLIA			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT (pr	int or type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be a 37 CFR 3.11. Completion of	low, no assignee of this form is NOT	data will appear of a substitute for f	on the patent. If an assignment.	gnee is identified below, the d	locument has been filed for
	EE	(B	,	CITY and STATE OR CO		
(A) NAME OF ASSIGN		ESEARCH	HSINC	HU HSIEN, TA	AIWAN, R.O.C.	
(A) NAME OF ASSIGN INDUSTRIAL	TECHNOLOGY F					
	TECHNOLOGY F					
INDUSTRIAL INSTITUTE	TECHNOLOGY F assignee category or category			t): 🔲 Individual 🔀	Corporation or other private gr	oup entity Government
INDUSTRIAL INSTITUTE Please check the appropriate 4a. The following fee(s) are	e assignee category or categor	ries (will not be pri	nted on the paten	(s):		oup entity Government
INDUSTRIAL INSTITUTE Please check the appropriate 4a. The following fee(s) are Issue Fee	e assignee category or category enclosed:	ries (will not be pri 4b	nted on the paten Payment of Fee(A check in th	s): e amount of the fee(s) is	enclosed.	· · · · · · · · · · · · · · · · · · ·
INDUSTRIAL INSTITUTE Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s	e assignee category or category cenclosed:	ries (will not be pri 4b	nted on the paten Payment of Fee(A check in th Payment by c	(s): e amount of the fee(s) is e redit card. Form PTO-20	enclosed. 38 is attached(if nec	essary)
INDUSTRIAL INSTITUTE Please check the appropriate 4a. The following fee(s) are	e assignee category or category cenclosed:	ries (will not be pri 4b	nted on the paten Payment of Fee(A check in th Payment by c	(s): e amount of the fee(s) is e redit card. Form PTO-20	enclosed. 38 is attached (if nec charge the required fee(s), or	essary) credit any overpayment, to
INDUSTRIAL INSTITUTE Please check the appropriate 4a. The following fee(s) are Issue Fee All Publication Fee (No see Advance Order - # or	e assignee category or category cenclosed:	ries (will not be pri 4b d) 	Payment of Fee(X A check in th Payment by c X The Director Deposit Account	is hereby authorized by Number 02-244	enclosed. 38 is attached (if nec charge the required fee(s), or	essary) credit any overpayment, to copy of this form).

Authorized Signature

Date DECEMBER 15,2005

Registration No. _

This collection of information is required by 37 CFR\1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

MUNC